

Application for Certificate of Occupancy

Application Date: _____

C of O Number: CO1402954

APPLICATION FEE IS NON-REFUNDABLE; CERTIFICATE FEE IS BASED ON SQUARE FOOTAGE

Erasing, Crossing Out, Whiting Out, or Otherwise Altering Any Entered Information Will Void This Application

INFORMATION ON THE BUILDING/PROPERTY

1. Property Address 2918 Martin Luther King Jr. Ave SE
2. Building/Property Owner's Name Lo TON ZHEN
Phone # 240-779-1186 Email _____
3. Property Square 5951 Suffix _____ Lot 0030
4. Number of Floors 1
5. Zone C-2-A Overlay (if applicable) _____

 RECEIVED
D.C. OFFICE OF ZONING
2014 NOV -7 PM 3:14

APPLICANT INFORMATION

6. Applicant's Name (see instructions) Qing CHEN Enterprise Inc.
7. Trade name of business (if applicable) China INN Deli
8. Applicant's Mailing Address _____
9. Applicant's Day Phone # 202-479-0744 Cell # 646-287-7789
Email _____

INFORMATION ON PREMISES/OCCUPANCY

10. ☒ Ownership Change ☐ Use Change ☐ Load Change ☐ Revision ☐ New Bldg
(choose one)
11. Proposed use of Premises Deli
12. Prior use of Premises Deli C of O # 0901255
13. Proposed Occupancy Load _____
14. Area Occupied by Proposed Use 1000 sq. ft.
15. List Floors of a building to be Occupied by Proposed Use First Floor
16. Does your business sell or rent any goods or provide any services that could be described as sexually-oriented?
☐ Yes ☐ No If yes, please fill out the supplemental form.
17. Is your business a Medical Marijuana Dispensary or Production Facility? ☐ Yes ☒ No
18. Was this use approved by an order of the BZA or ZC? ☐ Yes ☐ No
If yes, provide order # and date of approval _____
19. Is there a building permit associated with this application? ☐ Yes ☐ No If yes, building permit # _____
20. What use was listed on the building permit? _____
21. Were all inspections conducted and approved? ☐ Yes ☐ No
22. Is off-street parking on the property provided for this use? ☐ Yes ☐ No If yes, number of spaces _____

ATTESTATION AND SIGNATURE

I certify that all of the statements on this application are true to the best of my knowledge and belief. I agree to comply with all applicable laws and regulations of the District of Columbia.

Applicant or Agent's Signature chen cory Date 8/11/14

*If you are an applying as an **Agent** on behalf of the Applicant, attach completed **Authorization Form**

Making a false statement on this application can result in the denial or revocation of your certificate of occupancy and criminal penalties, under D.C. Official Code § 22-2405, of a fine up to \$1000 and/or imprisonment up to 180 days.

For more information about C of Os, please visit dcra.dc.gov and click on [Permits/Zoning](#)

Board of Zoning Adjustment
District of Columbia
CASE NO. 15023
EXHIBIT NO. 1

OFFICIAL DCRA USE ONLY

C of O # C0140295+Premises Address 2918 Martin Luther King Jr. Avenue SE

PERMIT REVIEW COORDINATOR

Checked items #1-9 for completeness ✓Approved By (Signature)Date 8/11/14

ZONING INFORMATION

BZA or ZC # (if applicable) _____

Prior C of O # (if applicable) _____

Prior Use on above C of O _____

ZONING REVIEWER

Continuation of Prior Use? ☐ Yes ☐ No

Zone _____

Use Allowed? ☐ Yes ☐ No Provide Zoning Code Use _____

Cite Zoning Section # _____

Off-street Parking Required? ☐ Yes ☐ No If yes, number of spaces required _____. If no, was a waiver granted?

Parking credit? BZA relief obtained? Describe: _____

Is Zoning Inspection Required? ☐ Yes ☐ No If Yes, describe: _____

Approved By _____

Date _____

ENGINEERING REVIEW AND APPROVAL

Prior Bldg Permit Applicable? ☐ Yes ☐ No Bldg. Permit # _____New Bldg Permit Required? ☐ Yes ☐ No

Construction Code Inspections for the Proposed Use:

Bldg
(715)Elec
(720)Plumb/Mech
(730/725)Fire
(750)

Approved By _____

Date _____

INSPECTIONS

Zoning Inspection (745) Approved? ☐ Yes ☐ No N/AAll Construction Code Inspections Approved? ☐ Yes ☐ No N/A

Stormwater Inspection Verification? Yes No N/A DDOE Approval _____

Date _____

Approved By _____

Date _____

APPROVAL

Issuance: By _____

Date _____

RECEIVED
D.C. OFFICE OF ZONING
2014 NOV - 7 PM 3:14